

Electronic Filing System (EFS) Data

Electronic Patent Application Submission

USPTO Use Only

EFS ID: 11895
Application ID: 09682067
Title of Invention: Method to Build a Control System based on Control Cells
First Named Inventor: Antonio Mugica
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2001-07-17
Submission Type: Utility Patent Filing
Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: 38146
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Certificate Message Digest: amDsVaor4anp6RUTTvZ3yA==
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Expiration Date: 09122002
Card Holder Name: Antonio Mugica
RAM User ID: EFSPROD
RAM Accounting Date: 2001-07-17
RAM Sequence Number: 314442
RAM Payment Status: RAM success
Postal Code: 33487

TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number: 38146

Method to Build a Control System based on Control Cells

First Named Inventor: Mr. Antonio Mugica

SUBMITTED BY

Name:

Mr. Jeffrey Furr Esq.

Electronic Signature Mark: Jeffrey
Furr

Date Signed: 20010717

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I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

bibd-transmittal

Concellapds.xml

fee-transmittal

Concellfee.xml

declaration

Dis1.tif

declaration

Dis2.tif

declaration

dis3.tif

specification

Conspec.xml

Attached Image File(s):

Dis1.tif

Dis2.tif

dis3.tif

Page 2 of 6

Comments:

1. The first sentence of the first paragraph is not clear. It should be reworded to state that the purpose of the study is to investigate the effect of the intervention on the outcome.

Please type a plus sign (+) inside this box → ☒

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing
OR
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

First Named Inventor

ANTONIO MUGICA

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD TO BUILD A CONTROL SYSTEM BASED ON CONTROL CELLS

(Title of the Invention)

the specification of which

☒ is attached hereto
OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuing-in-part applications, material information which became available between the filing date of the prior application and the national PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or invention certificate, or 365(a) of any PCT international application which designated at least one country other than the United States or America, listed below and have also identified below, by checking the box, any foreign application for patent or invention certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments should be directed to the Office of Management and Enterprise Services, Patent and Trademark Office, U.S. Department of Commerce.

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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

DECLARATION — Utility or Design Patent Application

Name of correspondence to: ☐ Customer Number or Box Code Label ☐ Correspondence section

Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on my behalf are believed to be true, and further that these statements were made with the knowledge that willful false statements are made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may be a basis for the application of any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR

☐ A petition has been filed for this unsigned

Given Name: ANTONIO
(first and middle [if any])

Family Name: MUGICA
or Surname

Inventor's
Signature

Date

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33498

Country: U.S.

NAME OF SECOND INVENTOR

☐ A petition has been filed for this unsigned

Given Name: CARLOS
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Inventor's
Signature

Date

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Mailing Address

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09502067.071701

Print type or plus sign (+) inside the box



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U.S. Patent and Trademark Office - U.S. DEPARTMENT OF COMMERCE

DECLARATION **ADDITIONAL INVENTOR**
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle if any):		Family Name or Surname:	
ROGER		PINATE	
Inventor's Signature:	Date:		
<i>[Signature]</i>		7/11/11	
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Caracas		Venezuela	
Mailing Address: Transversal 22, Qta. Que Faltas San			
Mailing Address: Montalban			
City:	State:	ZIP:	Country:
Caracas			Venezuela
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle if any):		Family Name or Surname:	
PAUL		BASIC	
Inventor's Signature:	Date:		
<i>[Signature]</i>		7/11/11	
Residence City:	State:	Country:	Citizenship:
Caracas		Venezuela	Venez
Mailing Address: Ave. Rosario, Transversal 1 to			
Mailing Address: Qta. Anna Michal, Los Charros			
City:	State:	ZIP:	Country:
Caracas			Venezuela
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle if any):		Family Name or Surname:	
Inventor's Signature:	Date:		
Residence City:	State:	Country:	Citizenship:
Mailing Address:			
Mailing Address:			

FEE TRANSMITTAL

Electronic Version 1.0.4

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity

Small Business Concern

TOTAL FEES AUTHORIZED: \$ 355

BANK (CREDIT) CARD INFORMATION:

Credit Card Number: 9699
Expiration Date: 20020912
Authorized Name: Antonio Mugica
Billing Address: 33487

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	201	\$ 355

Subtotal For Basic Filing Fee: \$ 355

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 6	203	\$ 9	0	\$ 0
Independent Claims: 2	202	\$ 40	0	\$ 0

Subtotal For Extra Claims Fees: \$ 0